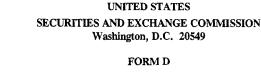
Prefix



NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED

	FORM D
OMB A	PPROVAL
OMB Number:	3235-0076
Expires:	August 31, 1998
Estimated average 1	burden

hours per response ...... 16.00

SEC USE ONLY

Serial

UNIFORM	M LIMITED OFFERING EXEMPTION	DATE RECEIVED
Name of Offering ([ ] check if this is an amendment and name has International Business Corporation Shares	changed, and indicate change.)	The state of the s
Filing Under (Check box(es) that apply): [ ] Rule 504 [ ] Rule 5 Type of Filing: [ ] New Filing [ X ] Amendment	05 [X] Rule 506 [] Section 4(6) [] UL	OE ( SEP 1 2 2003 )
A. 1	BASIC IDENTIFICATION DATA	(E)
Enter the information requested about the issuer		187 /87
Name of Issuer ([X] check if this is an amendment and name has Pandora Select Fund, Ltd.	changed, and indicate change.)	
Address of Executive Offices (Number and Street, City, State, Zip 3033 Excelsior Blvd., Suite 300, Minneapolis, Minnesota 55416	•	Telephone Number (Including Area Code) (612) 253-6025
Address of Principal Business Operations (Number and Street, City Executive Offices)	y, State, Zip Code) (if different from PROCESSED	Telephone Number (Including Area Code)
Brief Description of Business Private investment fund.	SEP 15 2003	
Type of Business Organization [ ] corporation [ ] limited partnership, already formed	THOMSON FINANCIAL	
[ ] business trust [ ] limited partnership, to be formed	[X] other (please specify): British Virgin	Islands International Business Company
Actual or Estimated Date of Incorporation or Organization:		Month Year  [0   8 ] [0   1 ] [X] Actual [ ] Estimated

### GENERAL INSTRUCTIONS

03031275

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

[F | N]

CN for Canada; FN for other foreign jurisdiction)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

## A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuer.

Check Box(es) that Apply: [X] Promoter [] Beneficial Owner [] Executive Officer [] Director [X] General and/or Managing Partner	
Full Name (Last name first, if individual) Whitebox Long Short Equity Advisors, LLC	
Business or Residence Address (Number and Street, City, State, Zip Code) 3033 Excelsior Blvd., Suite 300, Minneapolis, MN 55416	
Check Box(es) that Apply: [X] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner	
Full Name (Last name first, if individual) Redleaf, Andrew J.	
Business or Residence Address (Number and Street, City, State, Zip Code) 3033 Excelsior Boulevard, Suite 300, Minneapolis, MN 55416	
Check Box(es) that Apply: [ ] Promoter [ X ] Beneficial Owner [ ] Executive Officer [ ] Director [ ] General and/or Managing Partner	
Full Name (Last name first, if individual) Paul Redleaf Defined, Contribution Retirement Plan & Trust	
Business or Residence Address (Number and Street, City, State, Zip Code) 1015 Highway #13, #343, St. Paul, MN 55118	<u> </u>
Check Box(es) that Apply: [ ] Promoter [ X ] Beneficial Owner [ ] Executive Officer [ ] Director [ ] General and/or Managing Partner	
Full Name (Last name first, if individual) American Friends of the Israel Arts and Science Academy	
Business or Residence Address (Number and Street, City, State, Zip Code) 211 E. Chicago, Suite 1020, Chicago, IL 60611	
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ ] Executive Officer [ ] Director [ ] General and/or Managing Partner	
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ ] Executive Officer [ ] Director [ ] General and/or Managing Partner	
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ ] Executive Officer [ ] Director [ ] General and/or Managing Partner	
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	

SEC 1972 (2/97)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

				B. IN	FORMAT	ION ABO	UT OFFER	RING					
1. Has the issuer sole	d, or does th	e issuer inte	end to sell.	to non-accr	edited inve	stors in this	offering?						Yes No
	., or occur.							ınder ULO					( ) ( ) * )
2. What is the minim							_					÷	1 000 000*
What is the minim     Represent     to make a		imum capita	al contribut	ion by each	subscriber.								1,000,000*
3. Does the offering	permit joint	ownership	of a single	unit?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				,,	,,			Yes No [X] []
Enter the information of purchasers in constant of SEC and/or with a you may set forth	onnection was a state or sta	ith sales of tes, list the	securities in	n the offerir e broker or	ng. If a per dealer. If i	son to be li	sted is an as	sociated pe	rson or age	nt of a brok	er or deale	r registere	d with the
Full Name (Last name	e first, if ind	lividual)					····				······································		
Business or Residence	Address (N	lumber and	Street, Cit	y, State, Zi	p Code)								
Name of Associated I	Broker or De	ealer											
States in Which Person	n Listed Ha	s Solicited of	or Intends to	o Solicit Pu	rchasers			<del></del>					
(Check "All State	s" or check	individual S	states)	•••••		•••••	• • • • • • • • • • • • • • • • • • • •						] All States
[AL] [IL] [MT]	[AK] [IN] [NE]	[AZ] [IA] [NV]	[AR] [KS] [NH]	[CA] [KY] [NJ]	[CO] [LA] [NM]	[CT] [ME] [NY]	[DE] [MD] [NC]	[DC] [MA] [ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]	
[RI] Full Name (Last nam	[SC] e first, if inc	[SD] lividual)	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
· · · · · · · · · · · · · · · · · · ·													
Business or Residence	e Address (N	Number and	Street, Cit	y, State, Zi	p Code)								
Name of Associated I	Broker or Do	ealer											
States in Which Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers								
(Check "All State	s" or check	individual S	States)									[	] All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
Full Name (Last nam	e first, if inc	lividual)		<del></del>			······································						
Business or Residence	e Address (1	Number and	Street, Cit	y, State, Zi	p Code)	··. —							
Name of Associated l	Broker or D	ealer			<del></del>								
States in Which Perso	on Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers			<del></del>	<del></del>		<del></del>	<del></del>	
(Check "All State												[	] All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS							
1.	Enter the aggregate offering price of securities included in this offering and the total amount a the transaction is an exchange offering, check this box [] and indicate in the columns below already exchanged.							
	Type of Security	Aggregate Offering Price	Amount Already Sold					

Type of Security			Offering Price	-	Already Sold
Debt			\$ 0	\$ -	0
Equity	[X] Common	[ ] Preferred	\$ No Maximum	\$ _	1,250,000
Convertible Securities (including warr	rants)		\$ 0	\$ _	0
Limited Partnership Interests			\$ 0	\$_	0
Other (Specify		)	\$ 0	\$ _	0
Total			\$ No Maximum	\$ -	1,250,000

Answer also in Appendix, Column 3, if filing under ULOE.

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."

	Number Investors	Dollar Amount of Purchases
Accredited Investors	2\$	1,250,000
Non-accredited Investors	0 \$	0
Total (for filings under Rule 504 only)	\$	

Answer also in Appendix, Column 4, if filing under ULOE.

3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C--Question 1.

	Type of	Donar Amount
Type of Offering	Security	Sold
Rule 505		·
Regulation A	S	§
Rule 504		<b></b>
Total		S

a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees	[x]	\$5,000
Printing and Engraving Costs	[x]	\$
Legal Fees	[x]	\$15,000
Accounting Fees	[x]	\$
Engineering Fees	[]	\$0
Sales Commissions (Specify finders' fees separately)	[]	\$0
Other Expenses (identify) Miscellaneous	[x]	\$5,000
Total	[x]	\$30,000

<ul> <li>b. Enter the difference between the aggreg furnished in response to Part CQuestion</li> </ul>	gate offering price given in response to Part CQue 4.a. This difference is the "adjusted gross proceeds	stion 1 and total expents to the issuer"	ses			<u>1</u>	,220,000**
shown. If the amount for any purpose is a	d gross proceeds to the issuer used or proposed to not known, furnish an estimate and check the box to sted gross proceeds to the issuer set forth in response	o the left of the estima	ite. Tl	he total			
Colonies and food			¢	Payments to Officers, Directors & Affiliates	f 1	6	Payments to Others
Salaries and fees		[]	» —	<del></del>	[]	\$.	0
Purchase of real estate		[]	<b>\$</b> _	0	_ [ ]	\$.	0
Purchase, rental or leasing and installa	ation of machinery and equipment	[]	\$ _	00	[]	\$	0
Construction or leasing of plant facilities	buildings and	[]	\$ -	0	[]	\$	0
Acquisition of other businesses (includinvolved in this offering that may be unassets or securities of another issuer processes.)	used in exchange for the	[]	\$	0	[]	\$	0
Repayment of indebtedness		[]	·	0	_ []	\$	0
			ب پ		_	Φ.	0
Working capital		[]	\$_	0	_ [ ]	٠,	U
Other (specify): Investment in fina	incial instruments**	[x]	\$	0	[x]	\$	1,220,000*
Column Totals		[x]	\$	0	[x]	\$	1,220,000*
*** The issuer will pay the Investment Manager The Investment Manager also is entitled to an ar	t Already Sold, because the issuer has no maximum r an annual management fee of 1% of the net asset mual incentive fee equal to 20% of the net profits. offering expenses, brokerage fees, and other portfologies.	value of the issuer as of In addition, the issuer	of the f	ear all of its own	costs an	d exp	penses,
	D. FEDERAL SIGNATURE	E					
	need by the undersigned duly authorized person. If the S. Securities and Exchange Commission, upon write b)(2) of Rule 502.						
Issuer (Print or Type)	Signature	· · · · · · · · · · · · · · · · · · ·	Date				
PANDORA SELECT FUND, LTD.	By: Andrew J. Redleaf, M. Pandora Select Ad	,		August 2	9,2	003	
M1:835491.01							
	ATTENTION					_	
Intentional misstar	tements or omissions of fact constitute federal cri	iminal violations. (Se	e 18 U	J.S.C. 1001.)			ļ

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	E. STATE SIGNATURE							
1.	Is any party described in 17 CFR 230.252(c), (d), (e of such rule?			Yes No [ ] [ X]				
		See Appendix, Column 5, for state resp	oonse.					
2.	The undersigned issuer hereby undertakes to furnish such times as required by state law.	n to any state administrator of any state in v	which this notice is filed, a notice on Form D (17	CFR 239.500) at				
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.							
4.	The undersigned issuer represents that the issuer is (ULOE) of the state in which this notice is filed and conditions have been satisfied.							
	undersigned issuer makes the above undertaking urities Act of 1933.	s and representations only to the extent	that they may be required by a state under S	ection 18 of the				
The pers	issuer has read this notification and knows the conte	ents to be true and has duly caused this no	otice to be signed on its behalf by the undersigned	l duly authorized				
Issu	er (Print or Type) PANDORA SELECT FUND, LTD.	By:  Andrew J. Redleaf, Man Pandora Select Advi	<i>i</i>	2003				

M1:835491.01

# Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.